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FOREIGN AND INSULAR.

BRAZIL.

Report from Rio—Plague in Nictheroy—Treatment of plague by excision of buboes.

RIO DE JANEIRO, December 15, 1900.

SIR: I have the honor to transmit to you the official sanitary report for the fortnight, November 16 to 30, inclusive.

There were 588 deaths from all causes, being at the rate of 39.2 per diem, and corresponding to an annual death rate of 18.36 per 1,000 against 38 and 17.8 as compared with the previous period of half a month.

The number of deaths in regard to infectious and contagious diseases was as follows: Tuberculosis, 104 against 109; smallpox, 35 against 48; malarious infection, 29 against 33; bubonic plague, 10 against 11; beriberi, 6 against 7; measles, 6 against 5; yellow fever, 3 against 1; typhoid fever, 2 against 4; dysentery, 2 against 1; influenza, 2 against 0, and diphtheria, 0 against 2.

There were 509 births, that is, an average of 33.93 per diem, corresponding to an annual birth rate of 15.89 per 1,000.

The thermometer varied as follows: 30° C. maximum; 19.5° C. minimum, and 22.83° medium.

The march of the plague at Rio de Janeiro has been as follows:

Date.	New cases.	Deaths at—		Cured.	Number of patients in hospital.	Date.	New cases.	Deaths at—		Cured.	Number of patients in hospital.
		Hospital.	Residence.					Hospital.	Residence.		
Nov. 16...	.....	.....	.....	.....	25	Nov. 25...	.....	.....	.....	.....	21
Nov. 17...	.....	.....	.....	2	23	Nov. 26...	.....	.....	1	.....	21
Nov. 18...	1	1	.....	.....	23	Nov. 27...	.....	2	.....	.....	21
Nov. 19...	1	.....	1	.....	23	Nov. 28...	1	.....	.....	4	18
Nov. 20...	.....	.....	.....	2	24	Nov. 29...	1	1	.....	.....	17
Nov. 21...	.....	.....	.....	.....	22	Nov. 30...	1	.....	.....	.....	17
Nov. 22...	1	1	.....	.....	22	Total..	8	6	4	8	319
Nov. 23...	.....	1	.....	.....	21						
Nov. 24...	.....	.....	1	.....	21						

Official statistics of the bubonic plague.

The official statistics of the bubonic plague from April 18 to November 30, are as follows:

Cases ascertained.—Patients received at the Paula Candido Isolation Hospital during April 18 to August 31, 377; September, 27; October, 29; November, 20; total, 453. Cases confirmed at the residences of the patients during April 18 to August 31, 79; September, 4; October, 4; November, 6; total, 93.

Deaths.—Patients who have died at the Paulo Candido Hospital during April 18 to August 31, 146; September, 15; October, 18; November, 15; total, 194. There occurred at the residences of patients (ascertained) during April 18 to August 31, 79; September, 4; October, 4; November, 6; total, 93.

Recoveries.—Patients who have recovered at the Paula Candido Hospital during April 18 to August 31, 164; September, 45; October, 23; November, 13; total, 245. Patients remaining in the isolation hospital, 17.

Remarks on the deaths reported in the Paula Candido Isolation Hospital.—Nine were of patients who were dead on reaching the hospital; 55 were of persons who died within twenty-four hours; 33 were of persons who died within forty-eight hours; 97 were of persons whose deaths occurred more than forty-eight hours after their arrival at the hospital.

Plague at Nictheroy.

After a long period the bubonic plague has suddenly reappeared in the adjoining city of Nictheroy. All the cases made their appearance on Rua Vesconde de Rio Branco, there being 3 at No. 100 (brewery) and 1 at No. 113. It is necessary to note, that the diagnosis of the first victim was made post-mortem, and after 2 other cases had appeared at the same house. On the 6th instant, there died at that brewery a child, granddaughter of Joao F. Ribeiro, whose morbid state had perplexed the attending physician, who had no suspicion of its being a case of the Oriental plague. When the illness made its appearance in a son of the aforesaid, and in a negro child, Didymo, 9 years of age, son of a woman employed in the house, then it was that suspicion was aroused. After the death of Didymo, the physician communicated to the sanitary authorities his suspicions in regard to another minor, a mulatto, 15 years of age, who was ill at the tenement house No. 113.

It is expected that with the measures adopted the new focus of infection will be extinguished. The persons who were in contact with the plague patients were carried to the disinfection station, and after being thoroughly disinfected, they are permitted to return to their houses where they remain under vigilance. Therefore, 2 of these 4 patients died at their dwellings and the other 2 patients were taken to Paula Candido Isolation Hospital, where they have since died.

In the meantime, Mr. S. F. Ribeiro himself was also taken ill, and after two days illness he died at his residence.

A son of the late Mr. Ribeiro was also taken ill after returning from a visit to his family to a town adjoining Nictheroy, S. Goncalo. From the bacteriological examination of blood resulted the diagnosis of plague. The patient is in a very dangerous state.

Beside that, another case of plague with a fatal result was observed in Nictheroy, and in this instance there has been no connection between the patient and the other referred cases.

The director of board of health about the plague epidemic at Rio de Janeiro.

The director-general of public health addressed, on November 16, the following communication to the minister of interior, in regard to the difficulties, which he has encountered in his efforts to combat the plague: "Although it was my intention to present to the government a report of the principal sanitary occurrences in this city during the plague epidemic, on the occasion in which we should have the felicity to declare it extinct, I am nevertheless forced to submit at once to your excellency's consideration some reflections tending to show the origin of the colossal difficulties which I have to encounter on every step in combating the prevailing epidemic. This is not the proper moment for analyzing the circumstances under which our territory became contaminated. The maritime sanitary service was unable to prevent the

entrance of the epidemic germ, against which it was necessary to defend our population."

The cases in January thoroughly demonstrated in and out of the country, filled me with surprise, not because it has appeared, but because no one could account for its origin. "It fell from heaven," he said. On April 18 the new cases made their appearance at the Harmonia. These did not fall from Heaven. We were able to trace their origin and for some time to follow the track of the epidemic. It is to be supposed that the epidemic did not originate in a single initial focus, from which it spread in a progressive succession of contacts. In my opinion, there was a sort of pulverization of contaminating substances sprinkled over the city. But I am certain that the entrance of the germ was effected through the seaboard. On the 21st I had undoubted proofs of the reality of the plague and I proposed to your excellency that our misfortune should be officially declared. As was to be foreseen, in the midst of prejudices of every kind in which the medical class is largely represented, the news of the breaking out of the plague was received with incredulity. In communications addressed to the journals and inspired by feelings of humanity as well as by a sense of the responsibility of my position, I repeatedly invited hesitating practitioners to examine the patients taken to the Paulo Candido Hospital, binding myself to place within their reach all the necessary means for a complete solution of the problem. I state that the diagnosis of malarial lymphadenitis was totally inappropriate, under the circumstances, and only that of plague could be sustained.

I solicited the assistance of my colleagues in defending our threatened population, and I begged in the name of the interest of our country, of our professional credit, and of compassion for the patients, that they would give me their assistance. I implored them that they would put an end to dissensions unjustifiable in view of bacteriological proofs, indisputable and excluding all doubts, and finally in a supreme effort I asserted that the health directory would offer to physicians that desire to obtain patients at their houses, with the competent license, all the personal and material resources at its disposal, thus challenging them to a general struggle in which victory would be awarded to those who displayed the most charity and the most disinterested philanthropy.

No one ventured to discuss the matter in public, but murmurs continued and resistance increased.

There then appeared another argument against the plague diagnosis. The press referred to the formidable extent and astounding mortality of the Bombay epidemic, and the parallel was loudly proclaimed. In a quasiscientific association this parallel was produced some days ago in the midst of enthusiastical applause. Is it possible, it was asked, that a disease that kills at the rate of only 57 per cent can be the plague?

Two more objections have been produced by the systematic opponents of the plague diagnosis.

One refers to the limited spread of the epidemic in a city, whose insalubrious conditions those opponents exaggerate. This objection amounts to an eulogy of the health department. If there was not a greater spread of the epidemic, this was due to our efforts. I say it without modesty, for I have no right to diminish the glory due to my valiant colaborers. Since the beginning of the extraordinary health service of this city on May 28 we have visited about 40,000 dwellings, disinfected more than 10,000, closed about 1,000, modified the hygienic conditions in more than 4,000, and ordered rectifying measures in as many more.

The other objection is derived from the insistence with which certain physicians insinuate among the timid, that the treatment adopted at the Paulo Candido Hospital for plague patients is barbarous and unnecessary. Surgical intervention, especially the excision of infected glands, is characterized as cruelty. Patients are concealed and permitted to die without medical attendance or resort to practitioners who have promised them a mild treatment and a criminal discretion. This discretion, ordinarily, goes to the point of presenting a false death certificate. In order to appreciate the merits of surgical intervention in the treatment of plague, it is sufficient to examine the clinical registry at the Paulo Candido Hospital during a given period of time. In the quarter from June 1 to August 31 there were 221 operations on patients, of whom 46 died. The death rate is about 20.8 per cent. The cases of solitary buboes are still more edifying—in a total of 145 patients with semilocal buboes (those in the inguinal region prevailing to the number of 88) 120 were cured and 23 died. The two lacking to complete the number of 145 died from intervening diseases which appeared when the patients were convalescing from the plague. All of the patients were subjected to two bacteriological examinations, one made before the removal to the hospital and the other made in counterproof in the wards.

The serotherapeutic treatment was also instituted, but in many patients the effect of operating displayed such favorable results that injection of serum was rendered unnecessary. In no other hospital in the world, as far as I am aware, has there yet been obtained such encouraging results as at this, and I am also not aware that at any other hospital has there been adopted the surgical intervention which was adopted at the Paulo Candido. Moreover, there is another corroborating circumstance that serves to dissipate any remaining doubt in regard to the undesirable utility of surgical intervention. I refer to the recidivous cases. The decline of temperature is not always definite, for at the end of a greater or less space of time fever reappears with reactionary phenomena. The hospital physicians no longer hesitate; either in the surgical incision or in some other locality they seek the hyperinfected glands and extirpate them. Then the general phenomena disappear. Necropsy reveals always buboes inaccessible to opportunity of intervention, scattered in the mesentery or deeply situated in the tissues.

It is under these circumstances, Mr. Minister, that a set of unscrupulous physicians take pleasure in defaming the unparalleled treatment adopted at the Paulo Candido Hospital, with the narrow and selfish object of deviating from isolation patients that may swell their practice. It is thus that we, the sanitary authorities, are assailed by the ferocity of a secret war and are accused of being recreant to our professional duties, because the public treasury remunerates us for the services rendered to the community. It is thus that general health suffers in consequence of the concealment of plague patients; of the issue of false death certificates; of the lack of disinfection in undiscovered contaminated dwellings; of the conveyance of plague patients in public vehicles, when fleeing from one house to another, in which they are concealed. It is under these circumstances that we have to combat the epidemic, struggling with the ignorance of a part of the population, encouraged in disobedience and persuaded to suicide by the protervity of those who, oblivious of the duties of the medical priesthood, shamelessly fatten on degrading and degraded medical piracy. Under these circumstances, it is impossible to extinguish the prevailing epidemic. We are dis-

couraged and we are undeceived. When that which is respectable is no longer respected, then only fear can repress crime.

The fine of 100 mil reis, imposed on physicians who fail to notify cases of plague, is ridiculous as a penalty, for, as a rule, it is converted into a much-desired advertisement of mercenary villainy. Its moral effect is null, since the notion of morality is substituted by the exclusive desire for gain.

I beg, then, that your excellency will deign to support our efforts in benefit of public health, and will adopt severe measures for repressing such revolting abuses. After having secured the public interest from the trickery of such pirates, I shall have the honor to propose to your excellency the organization of the service ascertaining the total number of deaths, and then, and not till then, shall we be able to extirpate epidemic foci and preserve this capital from the disastrous endemic already dreaded of the plague.

Bills of health.

Since last report the following-named ships have been inspected and received bills of health of this office: November 26, bark *Herbert Black*, American, for Pascagoula; steamship *Flaxman*, British, for New York; steamship *Britannia*, British, for Newport, Va. November 29, barkentine, *Josephine*, American, for Baltimore. December 1, steamship *Buffon*, British, for New York. December 4, bark *Gulf Stream*, British, for New York. December 6, steamship *Cyprian Prince* British, for New York. December 12, bark *Innerwick*, British, for Darien, Ga. December 15, bark *Valuta*, Norwegian, for Pensacola.

Respectfully,

W. HAVELBURG, M. D.,

Acting Assistant Surgeon, U. S. M. H. S.

The SURGEON-GENERAL, *U. S. Marine-Hospital Service.*

CHINA.

Certification of food products destined for the United States.

HONGKONG, CHINA, December 10, 1900.

SIR: In further reply to Bureau order dated December 8, 1900, directing me to "certify food products originating in uninfected localities," I have the honor to report that the steamship companies are required to submit for inspection all shipping orders prior to loading the cargo. These shipping orders after being compared with the consular invoice, are signed and bear the consular seal, any prohibited article being plainly crossed out. This method was adopted because the manifests are in most cases made after the vessel leaves the port, from the shipping orders; where the manifest is made out and can be compared with the invoices it is signed.

Practically all food products going to America originate in and around Canton, probably the worst infected district in China.

A history is often unobtainable and in that case any article at all liable to convey infection is rejected.

I have been informed that feathers and human hair are often shipped from Canton to New York via Genoa and in that case might not pass through this office provided the goods were transhipped at the latter port.

Respectfully,

JOHN W. KERR,

Assistant Surgeon, U. S. M. H. S.

The SURGEON-GENERAL, *U. S. Marine-Hospital Service.*